

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: BROWN et al. Application No: 09/055,201 Confirmation No: 3603 Filed: April 3, 1998 Title: EXHAUST SYSTEM FOR TREATING PROCESS GAS EFFLUENT		Group Art Unit: 1763 Examiner: Rudy Zervigon Attorney Docket No: 000933 USA X02/ETCH/DRIE/JB March 5, 2003 San Francisco, CA 94107																																						
Box Fee Amendment Assistant Commissioner for Patents Washington, D.C. 20231		Extension of Term <input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136																																						
Papers Enclosed <input checked="" type="checkbox"/> Amendment and Marked-up Copy of Claims/Specification <input type="checkbox"/> 0 Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Declaration/Affidavit <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Postcard for Return		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Extension (Months)</th> <th style="width: 50%;">Extension Fee</th> </tr> <tr> <td><input checked="" type="checkbox"/> One Month</td> <td>\$110</td> </tr> <tr> <td><input type="checkbox"/> Two Months</td> <td>\$400</td> </tr> <tr> <td><input type="checkbox"/> Three Months</td> <td>\$920</td> </tr> <tr> <td colspan="2" style="text-align: center;">Total \$110</td> </tr> </table> <p><input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.</p>		Extension (Months)	Extension Fee	<input checked="" type="checkbox"/> One Month	\$110	<input type="checkbox"/> Two Months	\$400	<input type="checkbox"/> Three Months	\$920	Total \$110																												
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Fees for Extra Claims <div style="text-align: center;">Amendment Fee Calculation</div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">Claims remaining after amendment</th> <th rowspan="2">Highest Number Previously Paid for</th> <th rowspan="2">Number Extra</th> <th>Rate</th> <th rowspan="2">Additional Fee</th> </tr> <tr> <th>Large Entity</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>64</td> <td>67</td> <td>0</td> <td>\$18</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>13</td> <td>6</td> <td>7</td> <td>\$84</td> <td>\$588</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td></td> <td></td> <td>\$280</td> <td>0</td> </tr> <tr> <td>Supplemental Information Disclosure Statement</td> <td></td> <td></td> <td></td> <td>\$180</td> <td>0</td> </tr> <tr> <td colspan="5" style="text-align: right;">Total</td> <td>\$588</td> </tr> </tbody> </table>					Claims remaining after amendment	Highest Number Previously Paid for	Number Extra	Rate	Additional Fee	Large Entity	Total Claims	64	67	0	\$18	0	Independent Claims	13	6	7	\$84	\$588	Multiple Dependent Claims				\$280	0	Supplemental Information Disclosure Statement				\$180	0	Total					\$588
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Fee Payment <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Extension Fees</td> <td style="width: 50%;">\$110</td> </tr> <tr> <td>Fees for Extra Claims</td> <td>\$588</td> </tr> <tr> <td>Total</td> <td>\$698</td> </tr> </table> <p><input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of \$<u>698.00</u>.</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to: Box Fee Amendment Assistant Commissioner for Patents Washington, D.C. 20231</p> <p>By: <u>R. W. Nienstadt</u> Date: <u>March 5, 2003</u> Reece Nienstadt</p>		Extension Fees	\$110	Fees for Extra Claims	\$588	Total	\$698	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> Please direct all telephone calls to: Reece Nienstadt at (415) 538-1555 Please continue to send correspondence to: APPLIED MATERIALS, INC. Patent Department, M/S 2061 P.O. Box 450A Santa Clara, CA 95052 Respectfully Submitted, <u>R. W. Nienstadt</u> Date <u>March 5, 2003</u> Reece Nienstadt Registration No. 52,072																																
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